## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## 604791 **DOCUMENT #**

1. Entity Name

NORTH FLORIDA RADIOLOGY, P.A.



## **FILED** Feb 24, 2003 8:00 am Secretary of State 02-24-2003 90946 019 \*\*\*150.00

						OO WE TO						
Principal Place of Business 6716 NW 11TH PLACE GAINESVILLE FL 32605			Mailing Address 6716 NW 11TH PLACE GAINESVILLE FL 32605									
2. Principal F	Place of Busine	3. Mailin	3. Mailing Address									
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.					☐ CHECK HERE IF MAKING CHANGES					
City & Stat	te	City & State				4.	. FEI Number <b>59-1505851</b>	Number 59-1505851 Applied For Not Applicable				
Zip	Country			Zip Count			5.	. Certificate of Status Desired		\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent						
							Name					
O'CONNO	OR, GERARD						•					
			Street Address			ress (P.O.	Box Number is Not Acceptable)					
6716 NW 11TH PLACE GAINESVILLE FL 32605								<del></del>				
									FL	Zip Code		
	named entity tions of registe		r the purpos	e of changing its	registere	ed office or re	gistered a	agent, or both, in the State of Florid	la. I am fai	miliar with,	and accept	
SIGNATURE .	Signature, typed or	printed name of registered agent	and title if applica	ble. (NOTE	Registere	d Agent signature r	required when	n reinstating)	DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State								Election Campaign Finar     Trust Fund Contribution.	ncing		<b>0</b> May Be to Fees	
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STREET ADDRESS CITY-ST-ZIP	6716 NW 1 Gainsville					T ADDRESS						
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12. I hereby o	ertify that the i	nformation supplied with	this filing do	es not qualify for	the exer	nption stated	in Section	n 119.07(3)(i), Florida Statutes. I fu	rther certify	that the in	formation	

indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** 

Attachment 90019332

## NORTH FLORIDA RADIOLOGY, P.A. OFFICERS AND DIRECTORS DOCUMENT # 604791

PD O'CONNOR, GERARD A. 6716 NW 11<sup>TH</sup> PLACE GAINESVILLE, FL. 32605

SD ZEANAH, W. ROSS 6716 NW 11<sup>TH</sup>. PLACE GAINESVILLE, FL. 32605

TD JACKSON, DONALD E. 6716 NW 11<sup>TH</sup>. PLACE GAINESVILLE, FL. 32605

VD WARE, DAN 6716 NW 11<sup>TH</sup>. PLACE GAINESVILLE, FL. 32605

VD MCNEELY, G. FARRELL 6716 NW 11<sup>TH</sup>. PLACE GAINESVILLE, FL. 32605

VD BOON, JOHN 6716 NW 11<sup>TH</sup>. PLACE GAINESVILLE, FL. 32605 VD VOGLER, JAMES B. 6716 NW 11<sup>TH</sup>. PLACE GAINESVILLE, FL. 32605

VD YOUNATHAN, CAROL M. 6716 NW 11<sup>TH</sup>. PLACE GAINESVILLE, FL..32605

VD BAKER, MARK A. 6716 NW 11<sup>TH</sup>. PLACE GAINESVILLE, FL. 32605

VD KIM, JONG H 6716 NW 11<sup>TH</sup>. PLACE GAINESVILLE, FL. 32605

VD KINARD, RICHARD E. 6716 NW 11<sup>TH</sup>. PLACE GAINESVILLE, FL. 32605 VD YANCEY, JUDITH 6716 NW 11<sup>TH</sup>. PLACE GAINESVILLE, FL. 32605

VD BYERS, GEORGE E. 6716 NW 11<sup>TH</sup>. PLACE GAINESVILLE, Fb. 32605

VD WIECHMANN, BRET N. 6716 NW 11<sup>TH</sup>. PLACE GAINESVILLE, FL. 32605

VD ELLIOTT, JOHN 6716 NW 11<sup>TH</sup>. PLACE GAINESVILLE, FL. 32605

VD STORK, JOHN J. 6716 NW 11<sup>TH</sup>. PLACE GAINESVILLE, FL. 32605

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